# PERS MEDICAL INSURANCE

## MONTHLY RATES FOR 2020

## EFFECTIVE 1/1/20 - 12/31/20

| PLAN NAMES | Rates | | | Humboldt Deputy Sheriff's Organization (HDSO) Rates | | | Law Enforcement Management (LEM) Rates | | |
|---|---|---|---|---|---|---|---|---|---|
| | Employee Only | Employee+1 Dependent | Employee +2 or More | Employee Only | Employee+1 Dependent | Employee +2 or More | Employee Only | Employee+1 Dependent | Employee +2 or More |
| **PERS SELECT PPO** | $520.29 | $1,040.58 | $1,352.75 | $520.29 | $1,040.58 | $1,352.75 | $520.29 | $1,040.58 | $1,352.75 |
| County Share | $466.23 | $718.10 | $869.41 | $520.29 | $770.03 | $919.87 | $520.29 | $1,040.58 | $1,277.87 |
| **Employee Share** | **$54.06** | **$322.48** | **$483.34** | **$0.00** | **$270.55** | **$432.88** | **$0.00** | **$0.00** | **$74.88** |
| PLAN CODE | 531 | 532 | 533 | 531 | 532 | 533 | 531 | 532 | 533 |
| **PERS CHOICE PPO** | $861.18 | $1,722.36 | $2,239.07 | $861.18 | $1,722.36 | $2,239.07 | $861.18 | $1,722.36 | $2,239.07 |
| County Share | $466.23 | $718.10 | $869.41 | $520.29 | $770.03 | $919.87 | $861.18 | $1,128.03 | $1,277.87 |
| **Employee Share** | **$394.95** | **$1,004.26** | **$1,369.66** | **$340.89** | **$952.33** | **$1,319.20** | **$0.00** | **$594.33** | **$961.20** |
| PLAN CODE | 3221 | 3222 | 3223 | 3221 | 3222 | 3223 | 3221 | 3222 | 3223 |
| **PERS CARE PPO** | $1,133.14 | $2,266.28 | $2,946.16 | $1,133.14 | $2,266.28 | $2,946.16 | $1,133.14 | $2,266.28 | $2,946.16 |
| County Share | $466.23 | $718.10 | $869.41 | $520.29 | $770.03 | $919.87 | $878.29 | $1,128.03 | $1,277.87 |
| **Employee Share** | **$666.91** | **$1,548.18** | **$2,076.75** | **$612.85** | **$1,496.25** | **$2,026.29** | **$254.85** | **$1,138.25** | **$1,668.29** |
| PLAN CODE | 3271 | 3272 | 3273 | 3271 | 3272 | 3273 | 3271 | 3272 | 3273 |
| **BLUE SHIELD ACCESS+ HMO** | $1,127.77 | $2,255.54 | $2,932.20 | $1,127.77 | $2,255.54 | $2,932.20 | $1,127.77 | $2,255.54 | $2,932.20 |
| County Share | $466.23 | $718.10 | $869.41 | $520.29 | $770.03 | $919.87 | $878.29 | $1,128.03 | $1,277.87 |
| **Employee Share** | **$661.54** | **$1,537.44** | **$2,062.79** | **$607.48** | **$1,485.51** | **$2,012.33** | **$249.48** | **$1,127.51** | **$1,654.33** |
| PLAN CODE | 3031 | 3032 | 3033 | 3031 | 3032 | 3033 | 3031 | 3032 | 3033 |
| **ANTHEM TRADITIONAL HMO** | $1,184.84 | $2,369.68 | $3,080.58 | $1,184.84 | $2,369.68 | $3,080.58 | $1,184.84 | $2,369.68 | $3,080.58 |
| County Share | $466.23 | $718.10 | $869.41 | $520.29 | $770.03 | $919.87 | $878.29 | $1,128.03 | $1,277.87 |
| **Employee Share** | **$718.61** | **$1,651.58** | **$2,211.17** | **$664.55** | **$1,599.65** | **$2,160.71** | **$306.55** | **$1,241.65** | **$1,802.71** |
| PLAN CODE | 4661 | 4662 | 4663 | 4661 | 4662 | 4663 | 4661 | 4662 | 4663 |
| | **JUVENILE CORRECTIONS OFFICER and CORRECTIONAL DEPUTY ONLY** | | | | | | | | |
| **PORAC PPO** (Peace Officers Only) | $774.00 | $1,699.00 | $2,199.00 | $774.00 | $1,699.00 | $2,199.00 | $774.00 | $1,699.00 | $2,199.00 |
| County Share | $466.23 | $718.10 | $869.41 | $520.29 | $770.03 | $919.87 | $774.00 | $1,128.03 | $1,277.87 |
| **Employee Share** | **$307.77** | **$980.90** | **$1,329.59** | **$253.71** | **$928.97** | **$1,279.13** | **$0.00** | **$570.97** | **$921.13** |
| PLAN CODE | 2071 | 2072 | 2073 | 2071 | 2072 | 2073 | 2071 | 2072 | 2073 |
| **OPT OUT** | **$493.00** | | | **$390.22** | **$577.52** | **$689.90** | **$748.22** | **$935.52** | **$1,047.90** |